DECLARATION AND POWER OF	Attorney Docket Number	r 5693P035				
ATTORNEY FOR PATENT APPLICATION	First Named Inventor Mehul S. Shah					
(37 CFR 1.63) Declaration Submitted OR Submitted or	COMPLETE IF KNOWN					
	Application Number					
	Filing Date					
with Initial Filling (surcharge Filing (37 CFR 1,16(e))	Art Unit					
required)	Examiner Name					
As a below named inventor, I hereby declare that My residence, mailing address, and citizenship are at believe I am the original and first inventor (if only one inventor (if plural names are listed below) of the subject patent is sought on the invention entitled: Proximity Based Lossless Compression of	es stated below, next e name listed below) o ect matter which is cla	or an original and joint airned and for which a				
(Title of the Invention) the specification of which						
is attached hereto.						
OR		•				
was filed on (if applicable):						
or as United States Ap						
and was amended on	PCT International Application Number					
I hereby state that I have reviewed and understand the including the claim(s), as amended by any amendment	contents of the above t specifically referred	e-identified specification,				
I do not know and do not believe that the claimed inver of America before my invention thereof, or patented or before my invention thereof or more than one year prio believe that the claimed invention was in public use or one year prior to this application, nor do I know or belie the subject of an inventor's certificate issued before the the United States of America on an application filed by than twelve months (for a utility patent application) or s this application.	described in any prin or to this application. It on sale in the United eve that the invention a date of this applicat or me or my legal repre	ted publication in any country do not know and do not States of America more than has been patented or made ion in any country foreign to esentatives or assigns more				
I acknowledge the duty to disclose information which is 1.58, including for continuation-in-part applications, mathe filing date of the prior application and the national ocontinuation-in-part application.	iterial information which	ch became available between				
Duelot No. 5602D025						

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, or inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority

Prior Foreign Application(s):

Prior Fareign Application Number(s)	Country		Foreign Filing Dat (MM/DD/YYYY)		ority Zalmed	Certified Copy Attached?
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,				.0	3	☐Yes ☐No
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]	Yes No
Pirect all correspondence to:	Customer Num	ber	08791	or 🔲 C	orresponde	ence address bak
Name	⊠. Customer Num	ber	08791	or 🔲 C	orresponde	nce address bek
	aylor & Zafman LL	P				,
Address 12400 Wilshire Box	ilevard, 7th Floor					
City Los Angeles		State	California		Zip Code	90025
Country	Telep	hone	(408) 720-8300		Fax	(408) 720-838
hereby declare that all state nade on information and belinith the knowledge that willfunprisonment, or both, under alidity of the application or a	ief are believed to al false statement 18 U.S.C. 1001 any patent issued	be to s and and to there	rue; and further th I the like so made that such willful fal	at these are puni se stater	statement shable by nents may	s were made fine or y jeopardize th
ıll Name:			Mehul S. Shah Family Name (or Surr			

Docket No. 5693P035

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Inventor's Signature	Date	es, was suggest (i) uniyy)
	Date	
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(City , State, Mailing Address		(Country)
	A petition has been filed for this	undersigned inventor
Full Name:		
	Middle [if any], Family Name (or Surnam	e), and Suffix [if any])
Inventor's Signature	Date	
Residence	Citizensi	hip
(City, State,		(Country)
Mailing Address		
Docket No. 5693P035	-3-	